



# PACE

PEOPLE WITH  
ARTHRITIS CAN  
EXERCISE

## “I Feel Good About Myself and My Health”

*2004 Participant Satisfaction Report*



Arthritis & Osteoporosis Program  
Missouri Department of Health & Senior Services  
Chronic Disease Control

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# **“I Feel Good About Myself and My Health”**

PACE  
People with Arthritis Can Exercise

*Report on Participant Satisfaction*

## **Executive Summary**

*April 13, 2004*

- As of February 2004, evaluation forms from 755 participants in the Arthritis Foundation's People with Arthritis Can Exercise (PACE) program, offered through seven Regional Arthritis Centers (RACs), were submitted to the Missouri Arthritis and Osteoporosis Program (MAOP) for evaluation. The PACE program content is designed by the National Arthritis Foundation for the purpose of increasing flexibility, reducing pain and promoting participant wellness. The evaluations were meant to report in broad categories the perceived satisfaction of participants in the course. Although selected information may be useful for program improvement, the survey response was too low for meaningful comparisons.
- The 2001 People with Arthritis Can Exercise (PACE) program offerings were very favorably received and rated by participants. Descriptive analysis and anecdotal comments like: “I was able to stop arthritis medicine,” “I have since put the crutches behind,” and “It helps to keep the pain down,” are telling examples that support this. Notable are respondents' satisfaction and reasons for participation that illustrate PACE's appeal.
- 99.4 % of respondents indicated their needs were met.
- 99.7% of respondents would recommend PACE programs for others with arthritis. Overall satisfaction was achieved through improvement in the participants' conditions.

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- Respondents were satisfied with all evaluated aspects of the facility(ies) and program(s).
    - All components of the PACE program were rated “excellent” by more than two-thirds of respondents.
    - 99.4% of respondents indicated that their expectations were met, and 99.7% of respondents would recommend the PACE program to others with arthritis.
    - Remaining active/moving easier, generally feeling better, excellent program, appropriate exercises, and excellent instructors were the key ingredients in meeting expectations.
  - As participation grows, capacity issues are areas of concern. The components “barrier-free building,” “size of exercise room,” “air temperature,” and “time of day” should be closely monitored to ensure participant satisfaction (i.e., enough room, sufficient warmth without fluctuation, etc.)
    - Participant satisfaction with “size of exercise room” and “time of day” significantly decreased since 2000.
    - Participants suggested a larger exercise room, a desire for fewer interruptions from other groups using the same facility(ies), and music changes.
  - Tangible health improvement is the most important reason for participation. Program content and quality of instruction are essential for health improvement. The more commonly cited reasons were:
    - Helps me stay limber/avoid stiffness
    - Need/enjoy exercise
    - To feel better/general health
    - For my arthritis/arthritis exercises
    - Companionship
  - Less commonly cited, but perhaps important, reasons for participation were doctor’s advice, heard about program from a friend, and wanted professional help with needed exercises.
  - Few respondents desired additional information. Those who did indicated wanting information about other programs and services, such as swimming, home exercises, and types of arthritis.

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**“I have since put the crutches behind.”**

*- PACE participant response*

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# “I Feel Good About Myself and My Health”

## Report on Participant Satisfaction

*Participant Satisfaction of All PACE Courses as of February 2004*

### The Evaluation

As of February 2004, evaluation forms from 755 participants in the Arthritis Foundation’s People with Arthritis Can Exercise (PACE) program, submitted to the Missouri Arthritis and Osteoporosis Program (MAOP), and offered through seven Regional Arthritis Centers (RACs). Evaluation forms were received from 1999 to 2003, primarily from the Southwestern RAC. Figure 1 lists the frequencies of received evaluations by year. Fifty-six evaluation forms did not have a year designation. The Southwestern RAC submitted almost three-quarters of the participant evaluations. Only the Central RAC did not submit participant evaluations. Figure 2 lists the frequencies of received evaluations by RAC region.

**Figure 1. The Frequency of Evaluation Responses by Year, 1999-2004**

<b>Year</b>	<b>Number</b>	<b>Percent</b>
1999	56	8.0
2000	94	13.4
2001	178	25.5
2002	173	24.7
2003	185	26.5
2004	13	1.9
<i>Total</i>	<i>699</i>	

**Figure 2. The Frequency of Evaluation Responses by Region, 1999-2004**

<b>RAC</b>	<b>Number</b>	<b>Percent</b>
<b>Central</b>	<b>0</b>	<b>0</b>
Northeast	116	15.4
Northwest	39	5.1
Eastern	7	0.9
Kansas City	21	2.8
Southeast	18	2.4
Southwest	554	73.4
<i>Total</i>	<i>755</i>	

Two versions of the post-course surveys were used. Most questions appeared on both post-course surveys, but not all. Approximately 54 Northeastern RAC respondents completed a post-course survey that included eight additional questions. This report addresses only the data elements that appeared on both surveys.

## The Responses

Respondents were instructed, “For each item below, circle the number which best describes your evaluation of the facility and program. If you rate an item poor or fair, please briefly explain in the comments section.” Rating categories were: excellent, good, fair, and poor. On a small number of evaluation surveys, respondents could indicate that the category was not applicable. In any category, less than one half of one percent reported not applicable as a response. All program components were rated “excellent” by slightly more than two-thirds of the respondents. Figure 3 lists each of these components by both the response rate and by the category of the response.

**Figure 3. Survey Results by Program Component**

N=755	Response Rate	Percent Excellent	Percent Good	Percent Fair	Percent Poor	Percent Not Applicable
<i>FACILITY</i>						
Location	93.2%	71.3	27.8	0.3	0.3	--
Barrier-free Building	90.1%	70.4	28.3	1.0	0.1	0.1
Size of Exercise Room	90.7%	65.6	28.8	4.4	1.0	0.3
Dressing Room	48.3%	67.4	28.2	3.0	1.1	0.3
Air Temperature	92.4%	43.7	45.6	10.5	0.3	--
<i>PROGRAM</i>						
Time of Day	95.6%	69.5	29.7	0.7	0.1	--
Length of Class	94.6%	68.5	31.0	0.4	0.1	--
Length of Workout	87.4%	69.1	30.0	0.8	--	0.2
Frequency of Sessions	93.5%	64.0	33.9	2.0	0.1	--
Games/Social Activities	73.4%	65.3	33.0	1.1	0.4	0.2
Individual Exercises	70.1%	68.7	29.6	0.8	0.8	0.2

### 1. Facility

The query for dressing room had the lowest response rate of the facility components. The low response rate may be because a dressing room was not available at all PACE programs. If a dressing room is not routinely available, then the PACE program may want to delete this question from the participant evaluation form.

Air temperature received a relatively low proportion of “excellent” ratings (i.e., less than one-half) and a correspondingly high proportion of “fair” ratings (i.e., greater than one-tenth). A very small proportion (i.e., less than 5%) rated the size of the exercise room as “fair.”

## **2. Program**

The queries for games/social activities and individual exercises had the lowest response rates of the program components. Regardless, the responses of satisfaction were similar to the other categories.

## **3. Comments**

Two hundred seventy-nine respondents provided comments on the facilities and program, for a response rate of 36.9%. Some respondents provided more than one comment for a total of 337 comments. Two hundred eighty-three comments were positive (83.9%). Thirty comments were negative (8.9%). Twenty-four comments were neutral (7.2%). In broad categories, the positive comments were:

- Program excellent (84 responses)
- Enjoyed program/enjoy the exercises (51 responses)
- Instructor excellent (54 responses)
- Helped in general ( 36 response)
- Book excellent (2 responses)
- Facility excellent (13 responses),
- Specific instructions beneficial (15 responses)
- Glad for opportunity to take class (4 responses)
- People, social aspects (8 responses)
- Benefit of exercise - i.e., avoid stiffness, increase flexibility, etc. (8 responses)
- Improved mood/motivation (3 responses)
- Appreciate the facility or affordability (5 responses)

These positive comments provide additional information that is of value to the PACE programs. Respondents identified strengths of the facilities and programs, such as “PACE program excellent,” “enjoyed the PACE program,” “instructor excellent,” “participation generally helped,” etc.

In broad categories, the negative comments were:

- Room too small/crowded (7 responses)
- Class too large (4 responses)
- Facility rug dirty (1 response)
- It is confusing to do exercise toward the center of the room (1 response)
- It ended too soon (1 response)
- Room temperature variation, either too hot or too cold (6 responses)
- Parking lot issues (1 response)

- Need more handicap assistance (2 responses)
- A little far from home (1 response)
- Unpleasant music (1 response)
- Mosquitoes in dressing room (1 response)
- No dressing room (2 responses)

In general, these negative comments mirror the findings concerning participant satisfaction with the facility(ies) and program(s) components. The neutral comments were:

- Exercise three days per week (1 response)
- Exercise four days a week (4 responses)
- 45 minutes sessions (1 response)
- Don't exercise at home (2 responses)
- Wished I'd attended all classes (1 response)
- Had hip and knee surgery a year ago (2 responses)
- Doctor sent me to physical therapy 10 months ago (1 response)
- Can't walk true mile with so much equipment (1 response)
- Arm fatigue won't stop me (1 response)
- Don't do individual exercise (1 response)
- Floor exercise (1 response)
- Try to keep up (1 response)
- Warm sunshine helps (1 response)
- I'm not sure I have arthritis (1 response)
- I don't participate in social activities so far (1 response)
- I need to exercise (1 response)
- None (1 response)
- Three (2 responses)

The failure of some respondents to continue the exercises at home should be addressed to some extent by the PACE program leader.

#### **4. Why did you want to participate in this program?**

Six hundred sixty-nine participants responded to this question, for a response rate of 88.6%. In broad categories, reasons to participate were:

- Need/enjoy exercise (185 responses)
- To stay limber, maintain mobility (127 responses)
- To feel better/general health (102 responses)
- Gain strength, balance and/or exercise muscles (83 responses)
- For arthritis conditions (71 responses)
- Need motivation/socialization (40 responses)
- Doctor's advice (19 response)
- Pain (14 responses)

- Because of age (4 responses)
- Combination of additional diseases (4 responses),
- Heard about program from a friend (3 response),
- Non-specific osteoporosis/arthritis help (2 responses),
- To aid self-management of arthritis (2 responses),
- Wanted professional help with needed exercise (1 response), and
- Unable to discern the meaning or not answering the question (12 responses).

Respondents indicated a wide variety of reasons for participation. Helps me stay limber/maintain mobility (39%), need/enjoy exercise (18%), to feel better/general health (17%), and for arthritis/arthritis exercise (13% of responses) were the most commonly cited reasons for participation in the PACE program. Other notable responses include: companionship/social needs, pain management, doctor's advice/referral, and arthritis self-management.

## 5. Were your expectations met?

Seven hundred and fifty respondents indicated that their expectations were met. This is 99.4 % of all survey respondents.

**a. If yes, how?** Four hundred and ninety-seven participants responded to this question, for a response rate of 65.8%. Four hundred and ninety-one respondents indicated that their expectations were met. Forty-six of these responses denoted only non-specific statements of the program's merits. There were eight respondents that had multiple responses for this question. Four hundred and ninety-nine of the responses were positive (98.7%) and three neutral (0.3%). In broad categories, the positive responses were:

- Remain active/move easier (55 responses)
- Improvement noted in specific body part(s) (69 responses)
- Feel better, condition generally improved (61 responses)
- Excellent program (46 responses)
- Generally appropriate and beneficial exercises (88 responses)
- Exercises enhance range of motion (31 responses)
- Exercises provide needed activity (24 responses)
- Excellent instructor (47 responses)
- Group support/companionship (30 responses)
- Individual care/exercise at own pace (13 responses)
- Pain relief (12 responses)
- Fun and motivating (7 responses)
- Glad to have program (16 responses)

Positive feedback about exercises (28.6%), improvement of condition/feeling better (26.1%), and excellent instructor (9.4%) were the most commonly cited reasons for met expectations. Other notable responses included: group support/companionship, fun, and individual care/exercise at own pace. There were seven neutral responses.



**b. If no, why not?** Three respondents indicated that their expectations were not met. One response addressed a parking lot issue outside of RAC control. The responses were:

- Need more walking and leg exercise (1 response)
- When you get out it is so cold (1 response)
- Need parking lot fixed (1 response)

## **6. What qualities of the instructor did you find most helpful?**

Five hundred and twenty-nine participants responded to this question, for a response rate of 70%. In broad categories, the comments were:

- Pleasant/friendly (122 responses)
- Easy to follow, specific instructions (83 responses)
- Ability/knowledge (62 responses)
- Caring/helpful (57 responses)
- Generally excellent (49 responses)
- Concern for individuals/individual attention (45 responses)
- Patient/calm (34 responses)
- Positive (33 responses)
- Fun (21 responses),
- Cheerful (16 responses)
- Tolerance (9 responses)
- Consistent (1 response)
- The one we had (1 response)

Respondents indicated that pleasantness/friendliness (17% of all responses), easy to follow, specific instructions (15.6%), ability and knowledge (11.7%), caring/helpfulness (10.7%), and concern for individuals/individual attention (8.5%) were some of the most valued instructor qualities.

## **7. What qualities of the instructor did you find least helpful?**

Eighty-seven participants responded to this question, but only 18 had comments that expressed a deficiency. Most responses expressed full support. Using only the responses that expressed deficiency, the response rate was 3.4%. The responses were:

- Should speak more loudly (6 responses)
- Makes us do all the exercises (2 responses)
- Longer program/time (2 responses)
- More repetitions (1 response)
- I like to start on time (1 response)
- Doesn't hold the three counts (1 response)
- Walking (1 response)
- Teach more exercises to get our heart rate up (1 response)

- Sometimes a little too fast (1 response)
- Time (1 response)
- Better exercise room (1 response)

## 8. What would you change about this program?

One hundred sixty-four participants responded to this question, for a response rate of 12.1%. Three responses were neutral, and 72 responses indicated no desire for change. In broad categories, proposed changes to the course were:

- Have three times a week (32 responses)
- Less noise/fewer interruptions (9 responses)
- Sessions too short (9 responses)
- More frequent meetings (8 responses)
- A larger room to exercise in (7 responses)
- Have class all year long (6 responses)
- Dissatisfaction with the music (4 responses)
- Sessions too long (3 responses)
- More variety in the exercises (3 responses)
- Meet once per week (3 responses)
- Meet five days a week (2 responses)
- Cooler room (1 response)
- Room too hot (1 response)
- Less walking (1 response)
- Make the room smell better (1 response)
- Music (1 response)
- Closer to home (1 response)

Excluding responses that indicated no desire for change, the most commonly proposed comments were: have more sessions in a week (45.6% of responses), sessions too short (9.7%), and less noise/fewer interruptions (9.7%). Participants' desire for more frequent sessions was identified previously.

## 9. Would you recommend this program to other people with arthritis?

For all years, 99.7% of respondents would recommend this program to other people with arthritis.

**Figure 4. Survey Results by Participants' Recommendation**

<b>Number Of Responses</b>	<b>Response Rate</b>	<b>Percent 'Yes' Responses</b>	<b>Percent 'No' Responses</b>
610	80.7%	99.7%	0.3%

**a. If no, why not?** There were 17 responses to this question, all of which were supportive in nature and inappropriate to the question. Although not appropriate to the question, some responses indicate that there is successful recommendation of the PACE program to other people with arthritis among friends.

## **10. Please feel free to add any other comments below.**

In broad categories, the comments were:

- Appreciate opportunity to participate (3 responses)
- Satisfied with program/exercise (2 responses)
- Exercises helpful (2 responses)
- Glad exercise close to home (2 responses)

The most common comment was an appreciation, on the part of the respondents, for the opportunity to participate in the PACE program.

## **11. Please indicate what additional information you would like to receive from the Arthritis Foundation.**

Respondents were allowed to check all that applied, therefore, only positive responses were recorded. In 2001, relatively few respondents desired additional information from the Arthritis Foundation. Of those who did, information about other programs and services were the most commonly cited additional information desired, unlike in 1999 when a list of pamphlets was the most commonly cited and 2000 when membership information was commonly cited. Figure 4 lists the total responses for those who requested additional information. Of the eleven who desired information about programs and services, five specified the information desired. In broad categories, the desired information consisted of:

- Swimming (2 responses)
- Home exercises (1 response)
- Fibromyalgia (1 response)
- Arthritis and joint replacement (1 response)

**Figure 5. Responses for Those Who Requested Additional Information**

<b>Additional Information</b>	<b>Number Of Responses</b>	<b>Percent of All Respondents</b>
membership information	5	2.8%
list of pamphlets	11	6.2%
information about clubs/support groups	8	4.5%
information about other programs and services	14	7.9%

## Discussion

Respondents were satisfied with all evaluated aspects of the facilities and programs – 99.4% of respondents indicated that their expectations were met, and 99.7% of respondents would recommend the PACE program to others with arthritis. Overall, improvement in the participants' conditions was the major reason for satisfaction. Remaining active/moving easier, generally feeling better, excellent program, appropriate exercises, and excellent instructors were the more commonly cited reasons for why expectations were met. The program is ideal because it is structured for low impact exercise; there is a social component that motivates participants; and there are tangible physical benefits for the participants.

Instructors were praised for their pleasantness/friendliness, concern for individuals/individual attention, caring/helpfulness, and explaining exercises/specific instructions. The large number of positive responses in this category indicates that the instructors are viewed as courteous and knowledgeable; however, six respondents recommended the instructors should speak more loudly. In future PACE programs instructors should be sure to speak loudly, consider including more variety in the exercises, and music selection as indicated by the responses of question six.

The location, the scheduling of sessions, and the time of day is at the top of the participants' priorities, using the response rate as a measure. The responses to “dressing room,” “games/social activities,” and “individual exercises” had response rates of 50%, 75%, and 72% respectively, suggesting these were not integral components of the PACE program. While the response rates were low for these categories, many comments on the survey indicate that the social aspects of the program and individual attention to participants are important, as indicated by the responses to questions one, three and four. If “dressing rooms” were not and will not be consistently provided, in the future the PACE program may want to delete this question from the participant evaluation form.



**The program is ideal because it is structured for low impact exercise; there is a social component that motivates participants; and there are tangible physical benefits for the participants.**

The course components of “barrier-free building,” “size of exercise room,” “air temperature,” and “time of day” should be monitored to ensure participant satisfaction (i.e., enough room, sufficient warmth without fluctuation, etc.). If possible, PACE leaders should address these issues, in part by maintaining a constant air temperature and choosing larger rooms for exercise. Leaders should especially address “size of exercise room” and “time of day,” both of which experienced significant decreases in participant satisfaction since 2000. Based upon the participants’ proposed changes and suggestions, the “frequency of sessions” could be increased to three times per week.

Some respondents indicated that the classes were too far from their home. Additionally, respondents suggested a larger exercise room (either because the number of participants in the class was too large or by simply stating that the exercise room needs to be larger), a desire for fewer interruptions from other groups using the same facility(ies), and changes to the music. These responses, combined with the increasing numbers of respondents, are indicative of the growth in participation relative to the facilities’ fixed capacity.

Tangible health benefits, effective instruction, and companionship were the participants’ major reasons for participation. The most commonly cited specific reasons were: 1) helps me stay limber/avoid stiffness; 2) need/enjoy exercise; 3) to feel better/general health; 4) for my arthritis/arthritis exercises; and 5) companionship. Less commonly cited, but perhaps important, reasons for participation were need motivation, osteoporosis, doctor’s advice, heard about program from a friend, and wanted professional help with needed exercises. Very few respondents desired additional information. Those who did indicated information about other programs and services, such as swimming, home exercises, and types of arthritis.



The 2001 PACE program offerings were very favorably received and rated by participants. Descriptive analysis and anecdotal comments like “I was able to stop arthritis medicine”, “I have since put the crutches behind”, “it helps to keep the pain down”, are telling examples that support this. Notable are respondents’ satisfaction and reasons for participation that illustrate PACE’s appeal. Although respondents indicated improvements are possible in the ongoing implementation of PACE 2001, respondents were overall satisfied with program.

**For more information about arthritis and the PACE program, contact the Missouri Arthritis and Osteoporosis Program at 1-800-316-0935 or visit the website at [www.dhss.mo.gov/arthritis/](http://www.dhss.mo.gov/arthritis/).**



**Missouri Department of Health and Senior Services**  
**Chronic Disease Control Unit**  
*Missouri Arthritis and Osteoporosis Program*

**1-800-316-0935**

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